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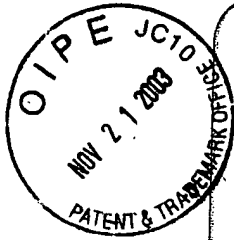
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**SUPPLEMENTAL  
DECLARATION FOR UTILITY  
OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Attorney Docket Number CLIN/ 8603

First Named Inventor KEITH JUSAS

**COMPLETE IF KNOWN**

Application Number 10/635,418

Filing Date Aug 6, 2003

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought or the invention entitled:

RFID ENCODING/VERIFYING APPARATUS

(Title of the invention)

the specification of which

☐ is attached hereto

OR:

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable)

I hereby declare that the subject matter of the ☐ attached amendment; ☐ amendment filed on  was part of my or our invention and was invented before the filing date of the original application, above identified for such invention.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

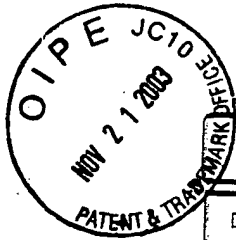
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☐ Additional foreign application numbers are listed on a supplemental priority data sheet; PTO/SB/02B attached hereto.

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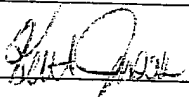
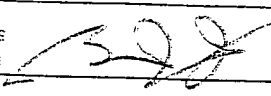


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PTO/SB/04 (11-01)

# SUPPLEMENTAL DECLARATION — UTILITY OR DESIGN PATENT APPLICATION

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
Name of Sole or First Inventor:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <b>KEITH</b>		Family Name or Surname <b>JUSAS</b>					
Inventor's Signature 				Date <b>9/5/03</b>			
Residence: City <b>KINGS PARK</b>		State <b>NY</b>		Country <b>USA</b>		Citizenship <b>US</b>	
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Mailing Address							
City <b>KINGS PARK</b>		State <b>NY</b>		ZIP <b>11754</b>		Country <b>USA</b>	
Name of Second Inventor:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <b>BRIAN</b>		Family Name or Surname <b>JUSAS</b>					
Inventor's Signature 				Date <b>9/5/03</b>			
Residence: City <b>WADING RIVER</b>		State <b>NY</b>		Country <b>11792</b>		Citizenship <b>US</b>	
Mailing Address <b>34 HIDDEN POND PATH</b>							
Mailing Address							
City <b>WADING RIVER</b>		State <b>NY</b>		ZIP <b>11792</b>		Country <b>USA</b>	
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

# DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 2 of 2

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name TODD

Family Name or Surname JUSAS

Inventor's Signature

*Todd Jusas*

Date 9/5/03

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Citizenship US

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Country USA

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

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Family Name or Surname

Inventor's Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

Mailing Address

City

State

ZIP

Country

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name

Family Name or Surname

Inventor's Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

Mailing Address

City

State

ZIP

Country